

Late Independent Expenditure Report

Type or print in ink.
Amounts may be rounded to whole dollars.

LATE INDEPENDENT EXPENDITURE REPORT

| | | | | |
|---|--|--|-----------------------------------|--|
| NAME OF FILER Election Watchdog Sponsored by: Consumer Watchdog | | Date of This Filing _____ 10/14/2005 | Date Stamp Page 1 of 2 | <div style="background-color: black; color: white; padding: 5px; font-weight: bold; font-size: 1.2em;"> CALIFORNIA FORM 496 </div> For Official Use Only |
| AREA CODE/PHONE NUMBER | I.D. NUMBER (if applicable) 951571 | Report No. _____ 001 | | |
| STREET ADDRESS | | <input type="checkbox"/> Amendment to Report No. _____ (explain below) | | |
| CITY Santa Monica | STATE CA | ZIP CODE 90405 | | |

1. List Only One Candidate or Ballot Measure

| | | | | | | |
|---|----------------|---------------|---|----------------------------|----------------|--------------------|
| NAME OF CANDIDATE SUPPORTED OR OPPOSED | | | NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED Public School Teachers Tenure. Initiative Statute | | | |
| OFFICE SOUGHT OR HELD/DISTRICT NO. | SUPPORT | OPPOSE | BALLOT NO./LETTER 74 | JURISDICTION STW | SUPPORT | OPPOSE X |

2. Independent Expenditures Made Attach additional information on appropriately labeled continuation sheets.

| DATE | DESCRIPTION OF EXPENDITURE | AMOUNT |
|------------|----------------------------|------------|
| 10/14/2005 | Web Animation | \$3,750.00 |
| | | |
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| | | |
| | | |
| | | |

Reason for Amendment:

Late Independent Expenditure Report

LATE INDEPENDENT EXPENDITURE REPORT

CALIFORNIA
FORM 496

NAME OF FILER

I.D. NUMBER (If applicable)

3. Contributions of \$100 or More Received*

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE** | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED | INTEREST RATES |
|---------------|---|--|---|-----------------|---|
| | | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | If loan, enter interest rate, if any _____% |
| | | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | If loan, enter interest rate, if any _____% |
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| | | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | If loan, enter interest rate, if any _____% |
| | | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | If loan, enter interest rate, if any _____% |

*Major donor and independent expenditure committees that do not receive contributions are not required to complete Part 3.

**Contributor Codes
 IND - Individual
 COM - Recipient Committee (other than PTY or SCC)
 OTH - Other
 PTY - Political Party
 SCC - Small Contributor Committee

FPPC Form 496 (June/01)
 FPPC Toll-Free Helpline: 866/ASK-FPPC
 866/275-3772